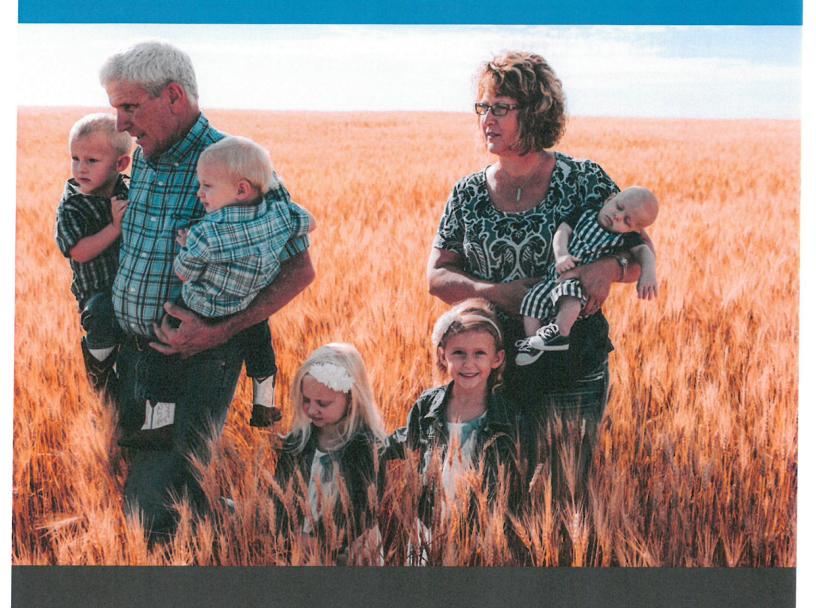
November 2018



Churchill County Social Services

2018-2023 Strategic Plan

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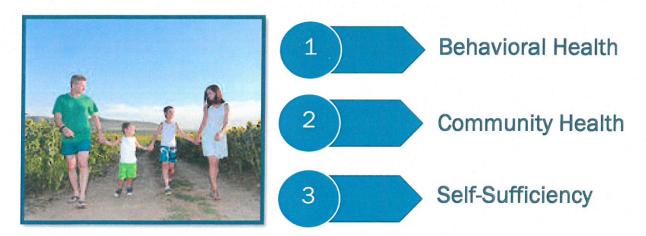
Executive Summary

Churchill County Social Services (CCSS) is a Community Action Agency and Family Resource Center that works to facilitate the self-sufficiency of residents throughout Churchill County's communities, ensuring that individuals and families have the opportunity to grow and prosper. The organization is part of Churchill County government, and partners with several federal, state, and local organizations to implement effective social service programs for residents in Churchill County.

In March of 2018, CCSS embarked upon a strategic planning process to effectively guide agency efforts between 2018-2023. As an initial step in the process, the agency confirmed the Vision and Mission associated with its work. It also revisited the five core values that all CCSS staff members strive to use when making decisions, interacting with others and conducting their day to day work:



Following the affirmation of these foundational pillars of the agency, CCSS embarked upon a scan of the environment in which services are being provided. The results of this situational analysis led to the identification of three areas of focus:



Goals and objectives were developed within each of these focus areas and are meant to direct organizational efforts over the next 5 years.

Behavioral Health

Goal 1: Increase the availability of behavioral health services and supports.

- 1.1. Provide consistent training for law enforcement and emergency services regarding behavioral health issues.
- 1.2. Develop comprehensive programs to increase access to housing, insurance, and income and disability benefits for people with behavioral health issues.
- 1.3. Provide assessment, intervention, and ongoing support to individuals with behavioral health issues
- 1.4. Ensure behavioral health resources are available to justice involved individuals upon reentry to the community.

Goal 2: Enhance youth, parent, and teacher understanding of behavioral health issues.

- 2.1. Educate youth and their parents about mental health and substance abuse, as well as services and resources.
- 2.2. Develop a youth support group.
- 2.3. Educate parents and teachers to recognize and identify youth who have undergone traumatic experiences

Community Health

Goal 3: Reduce the number of unplanned pregnancies and STDs.

- 3.1 Provide increased education and treatment for STDs and other communicable diseases.
- 3.2 Provide family planning education to youth and the community.
- 3.3 Increase the number of family planning services and activities available in communities.
- 3.4 Engage inmates at Churchill County Detention Centers in family planning and STD testing both during detention and upon community re-entry.

Goals 4: Increase community participation in activities that support health and wellness.

- 4.1 Provide increased education about healthy habits.
- 4.2 Collaborate with organizations that support positive health activities.

Self-Sufficiency

Goal #5:

- 5.1 Provide support services to obtain and maintain Self-Sufficiency
- 5.2 Increase community awareness on agency and partner programming
- 5.3 Further community partners to provide ongoing assistance for residents
- 5.4 Increase partnerships to obtain funding to support sustainability of success programming

Introduction

Through a variety of programs and in collaboration with other community partners, Churchill County Social Services supports residents as they secure and retain employment, maintain adequate housing, receive medical and behavioral health services, obtain energy subsidy and weatherization assistance, and other personal and family development opportunities to build and achieve individual and family self-sufficiency.

Purpose of the Plan

CCSS has established this Strategic Plan to effectively guide its efforts to facilitate the self-sufficiency of all Churchill County residents. This document outlines the issues currently facing County residents as well as the plan to address those issues. It is not a business or financial plan, but rather a framework for making policy decisions, setting priorities, and most effectively allocating resources. It is meant to serve as a meaningful management tool to increase the positive impact that CCSS can have on communities throughout Churchill County.

Organization of the Plan

This plan is comprised of four sections in addition to the executive summary and this introduction.

Organizational Overview

• In this section, information is presented to provide a general understanding of CCSS, to include the vision and mission of the organization, current services, and recent organizational accomplishments.

Situational Analysis

• In this section, the current reality for the residents of Churchill County is described as well as the focus areas that have been prioritized for action.

Strategic Plan Goals and Objectives

 This section describes the goals and objectives the organization will embark upon between 2018 and 2023.

Evaluating and Updating the Plan

 This section describes how the organization will measure and report on its success and lessons learned.

This document also includes an appendix containing a one-year action plan that will be updated annually.

Organizational Overview

Churchill County Social Services (CCSS) is a Community Action Agency and Family Resource Center that works to facilitate the self-sufficiency of residents throughout Churchill County's communities, ensuring that individuals and families have the opportunity to grow and prosper. The organization is part of Churchill County government, and partners with several federal, state, and local organizations to implement anti-poverty efforts for residents in Churchill County.

Strategic Framework

Together the vision, mission and values form the framework in which Churchill County Social Services operates

Vision

To support and implement programs that assist welfare recipients to grow in selfesteem and responsibility so they can move from welfare rolls to independence.

Mission

To facilitate the self-sufficiency of program recipients.

These programs provide for the health and welfare of county residents who are eligible indigents to receive emergency temporary assistance

Values

Innovation

Collaboration

Accountability

Responsibility

Excellence

Services Provided

CCSS coordinates various funding streams to provide services that support the needs of low-income and vulnerable individuals and families in Churchill County. Efforts include:

General Assistance

- Rent and Utility Supports
- Homeless Services
- Adult Employment Supports
- Indigent Medical, prescription, cremation and long term care
- Victims of Crime Assisatnce
- Referrals for Food, clothing, medical and utility subsidies

Public Guadianship

 Legal guardianship for individuals unable to care for themselves

Community Partnerships

- Mobile Case Management
- Reduction of Jail Reciticism
- · Community Health Nursing
- Child and Elder Abuse awreness adn reduction
- Fallon Community Day
- Wishing Tree Holiday Support

In addition to direct services, CCSS also serves as an advocate for the most vulnerable residents in the county and a community convener to address systemic issues. This is evident in its work with the local Behavioral Health Task Force, and its involvement in the rural Nevada Continuum of Care for Homelessness.

Recent Accomplishments

CCSS has undergone considerable change over the last decade, experiencing challenges, growth and an increased need for its services and supports. It has consistently worked to assess gaps and duplication of services within the community and has worked towards building collaboration with local government and community partners to increase access to services.

Recent accomplishments for the agency include:

- Member of the Northern Nevada Regional Behavioral Health Taskforce to increase coordinated action for mentally ill
- Development of mobile case management to provide wrap around service coordination to those at high risk of crisis

.

Advocacy on behalf of indivuals suffering from behavioral health issues.

Trainings provided to law enforcement and community services providers to support effective care.

Strengthend partnerships with community members.

Situational Analysis

The following situational analysis was completed to assist the organization in understanding the current reality for the residents of Churchill County as well as what issues are facing CCSS as an organization.

Community Characteristics

Churchill County is a rural area consisting of approximately 4,900 square miles, with an estimated population of 24,230 as of 2017. The county seat of Fallon is the primary population center, with other small communities including Hazen, Middlegate, and Cold Springs. The County is widely known as a rural agricultural community, however, it is also home to the Naval Air Station (NAS) Fallon with over 3,000 active duty personnel, civil employees, and contractors.¹ Agriculture and military related activities are essential components of Churchill County's economy.

Demographic Information

The following table represents the demographics of Churchill County (U.S. Census Bureau, 2016 and 2017 Projections). As identified in the table, half (50.8%) of the population in Churchill County are male and 49.2% are female. The largest age group in Washoe County consists of adults over age 60 (25%), followed by adults ages 35-54 (23%), and young adults ages of 20-34 (20%). The majority of Washoe County residents are White (74.5%), with the second largest group being Hispanic/Latino (12.9%).

Gender

¹ Commander Navy Installation Command. Accessed online on July 24, 2018 at https://www.cnic.navy.mil/regions/cnrsw/installations/nas_fallon.html.

	Ма	le			Fer	nale					
Number (#) of Population		Percent (%) of Population		Number (#) of Population		Percent (%) of Population					
12,306		50.8%		11,924		49.2%					
Age											
0-:	14	15-	19	20	-34	35	-54	55	-59	(60+
#	%	#	%	#	%	#	%	#	%	#	%
4,629	19%	1,486	6%	4,728	20%	5,491	23%	1,738	7%	6,158	25%
Race/Et	hnicity										
Wh	ite	Bla	ck	Amei Ind			Pacific nder		r More ces		anic / tino
#	%	#	%	#	%	#	%	#	%	#	%
17,991	74.5%	555	2.3%	1,045	4.3%	652	2.7%	779	3.2%	3,126	12.9%

Economic Conditions

The median household income in Churchill County is \$46,195 as of 2014, with 16.86% of residents living below the poverty line. As of January 2016, Churchill County had an unemployment rate of 7%, which is higher than state and federal unemployment rates. Employment within the area is primarily supported through education, health care and social services, local government, the Naval Air Station, retail and other smaller industries such as transportation, warehousing, and construction.

County Health Rankings

The County Health Rankings measures the health of nearly all counties in the nation. The data is compiled using county-level measures from a variety of national and state data sources. The data represented in the chart below are taken from the most recent data available (2010-2016). These measures are standardized and combined using scientifically-informed weights².

The table below provides a snapshot of how Churchill County characteristics compare to the state of Nevada as well as their placement in relationship to nationally established benchmarks. The information provided lends to an understanding that a number of co-existing factors are affecting Churchill County residents.

	Community Characteristics	Churchill County	Nevada	Top U.S. Performers
Mortality & Morbidity	Poor or Fair Health (percent of adults reporting fair or poor health)	17%	21%	12%
	Poor Physical Health Days (average number in past 30 days)	4.2	4.3	3.0

² Retrieved on August 13, 2018 from:

http://www.countyhealthrankings.org/app/nevada/2018/rankings/churchill/county/outcomes/overall/snapshot

	Community Characteristics	Churchill County	Nevada	Top U.S. Performers
	Poor Mental Health Days (average number in past 30 days)	4.4	4.5	3.1
	Low Birth Weight (percent of live births with weight <2500 grams)	7%	8%	6%
	Adult Smoking (percent of adults that smoke)	18%	16%	14%
	Adult Obesity (percent of adults that report a BMI >= 30)	25%	27%	26%
Health Behaviors	Physical Inactivity (percent of adults age 20 and over that report no leisure time physical activity)	25%	22%	20%
alth Be	Excessive Drinking (percent of adults who report heavy or binge drinking)	17%	18%	13%
至	Sexually Transmitted Infections (number of newly diagnosed chlamydia cases per 100,00 population)	225.1	455.3	145.1
	Teen Birth Rate (per 1,000 females ages 15-19)	36	31	15
	Drug Overdose Deaths (number of drug poisoning deaths per 100,000 population	28	21	10
an and	Uninsured (percent of population < age 65 without health insurance)	14%	14%	6%
Clinical Care	Primary Care Physicians (ratio of population to primary care physicians)	2,200:1	1,760:1	1,030:1
Clinic	Dentists (ratio of population to dentists)	1,420:1	1,630:1	1,280:1
	Mental Health Providers (ratio of population to mental health providers)	600:1	540:1	330:1
	High School Graduation (percent of ninth grade cohort that graduates in 4 years)	67%	73%	95%
actors	Some College (percent of adults aged 25-44 years with some post- secondary education)	55%	57%	72%
Social & Economic Factors	Median Household Income (median household income)	\$50,300	\$55,200	\$65,200
	Unemployment (percent of population age 16+ unemployed)	5.4%	5.7%	3.2%
ocial &	Children in Poverty (percent of children under age 18 in poverty)	21%	20%	12%
Ø	Food Insecurity (percent of population who lack adequate access to food)	15%	14%	10%

	Community Characteristics	Churchill County	Nevada	Top U.S. Performers
	Social Associations (number of membership associations per 100,00 population)	10.7	4.2	22.1
	Children in Single-Parent Households (percent of children that live in single-parent household)	33%	37%	20%
	Violent Crime Rate (violent crime rate per 100,000 population)	187	616	62
Physical Environment	Housing (percent of households with at least 1 of 4 housing problems: overcrowding, high housing costs, or lack of kitchen or pluming facilities)	15%	21%	9%
Phy Enviro	Limited Access to Healthy Foods (percent of population who are low-income and do not live close to a grocery store)	9%	5%	2%

Needs Assessment

The most recent Churchill County Community Needs Assessment was completed in February 2017. As a recipient of Community Service Block Grant (CSBG) funding, Churchill County Social Services conducts a community needs assessment at least once every three years to better understand the conditions in the community that create barriers for low-income families. The Community Needs Assessment identified the following five areas as the most important issues impacting low-income families in Churchill County.

Energy Assistance

• The cost of utilities is a significant challenge for many low-income families. Energy inefficient homes pose an even greater challenge to meeting monthly costs.

Employment

 Churchill has limited diverse job opportunities that provide a living wage. Insufficient training, education, and skills of potential applicants further creates challenges, as do transportation barriers.

Health Insurance for Adults

• The high cost of health insurance impacts accessibility to proper health care. Not all employers are able to offer insurance, and those that do may require high premiums. Plans available through Nevada Health Link, Nevada's health insurance exchange, are also not always affordable.

Behavioral Health Care

 Access to appropriate counseling and treatment services for individuals with substance abuse or mental health concerns is extremely challenging due to a lack of providers and high costs for care.

Medical Health Care

• Low income households struggle with the cost of housing due to a lack of affordable housing options. Issues with poor credit history, past evictions and criminal history also create barriers.

Areas of Focus

CCSS used the data established through the situational analysis to determine three focus areas for action, which include:

- 1. Access and awareness of behavioral health issues and resources.
- 2. Community health improvement.
- 3. Services and supports that enhance self-sufficiency.

Strategic Plan Goals and Strategies

Churchill County Social Services worked with other community agencies, coalitions, and human service boards to identify goals and strategies that would address the focus areas identified for action. The following goals and strategies shall serve as a roadmap to focus the agencies efforts over the next five years. The plan guides limited staff resources at a strategic level and establishes a framework to assist the agency in measuring progress toward meeting its goals and holding it accountable in the work that it does

Behavioral Health

(3)	Goal: Increase the availability of behavioral health services and supports.
Strategy #1	Provide consistent training for law enforcement and emergency services regarding behavioral health issues.
Strategy #2	Develop comprehensive programs to increase access to housing, insurance, and income and disability benefits for people with behavioral health issues.
Strategy #3	Provide assessment, intervention, and ongoing support to individuals with behavioral health issues.
Strategy #4	Ensure behavioral health resources are available to justice involved individuals upon reentry to the community.

	Goal: Enhance youth, parent, and teacher understanding of behavioral health issues.
Strategy #1	Educate youth and their parents about mental health and substance abuse, as well as services and resources.
Strategy #2	Develop a youth support group.
Strategy #3	Educate parents and teachers to recognize and identify youth who have undergone traumatic experiences.

Community Health

	Goal: Reduce the number of unplanned pregnancies and STDs.
Strategy #1	Provide increased education and treatment for STDs and other communicable diseases.
Strategy #2	Provide family planning education to youth and the community.
Strategy #3	Increase the number of family planning services and activities available in communities.
Strategy #4	Engage inmates at Churchill County Detention centers in family planning and STD testing both during detention and upon reentry.

(0)	Goal: Increase community participation in activities that support health and wellness.
Strategy #1	Provide increased education about healthy habits.
Strategy #2	Collaborate with organizations that support health activities.

Self-Sufficiency

#	Goal: Increase access to crisis prevention services to reduce poverty
Strategy #1	Increase outreach efforts to at risk community members to increase prevention participation
Strategy #2	Increase community partnership communication to reduce program barriers and duplication for community members to access

Updating and Evaluation the Plan

CCSS is committed to ongoing evaluation of this plan and will regularly assess the status of achievement through quarterly review and annual evaluation of each of the strategies contained herein.

Appendix

Annual Action Plan 2018

The following tables represent CCSS' action plan to move towards accomplishing each of its goals.

The annual plan will be updated by Churchill County Social Services on an annual basis to remove action steps that have been completed, incorporate new action steps to address existing goals and strategies, or to update the timeline.

Focus Area: Behavioral Health

behavioral health issues. Action Steps	Timeline	Performance Benchmarks
Provide law enforcement, emergency services, and behavioral health care providers with at least four annual crisis intervention trainings	 ✓ By March 2018, five new graduates will have completed crisis intervention training. ✓ By May 2018, 15 new graduates ✓ August 2018: 5 new graduates ✓ November 2018: 5 new graduates 	Annually Churchill County will have 30 new graduates from 40 hour Crisis Intervention Training
Develop regional curriculum for Mental Health 101 and dentify refresher courses online	 ✓ By November 2018 develop curriculum for Mental Health 101 ✓ By November 2018 identify online courses and develop a quarterly schedule 	Mental Health 101 and other behavioral health refresher courses will be posted online for regional member access New laws related to behavioral health will appear in a banner online update Education services will be added including: POST / CE BOH NV E-learn / Project Echo

Strategy #2: Develop comprehensive programs to increase access to housing, insurance, and income and disability benefits for people with behavioral health issues.				
Action Steps	Timeline	Performance Benchmarks		
Increase outreach for SOAR (SSI/SSDI Outreach, Access and Recovery)	 ✓ By December 2018 have 1 SOAR Certified Coordinator ✓ March 2019 participate the implementation of a regional SOAR training the trainer program ✓ Obtain CMIS ID card system ✓ Provide community training on card system ✓ Issue cards to clientele 	Reduction of BH crisis for identified disabled – EMS, ER, and dispatch Increased SOAR and train the trainer ID cards for CMS Reduction of BH crisis for identified disabled – EMS, ER, and dispatch		
Develop a landlord education program to support housing	 ✓ By March 2019 implement a landlord engagement program for housing to be held annually ✓ Coordinate a community housing committee ✓ Implement a community-based housing plan to reduce access to housing 	Development of workforce housing sub-committee Creation of housing priority needs for Churchill County Engagement of developers in creation of housing opportunities Identify funding partners to support needs		
Divert Adults in Crisis from Jail to mental health services	✓ Increase Mental Health Awareness through Community ✓ Train first responders on services available for behavioral health issues ✓ Provide case manager in jail to reduce jail reentry after release	Increase access points for behavioral health services Develop diversion strategies through SIM Provide support to first responders for diversion through MOST or other identified programming Identify and obtain funding to support model		

Increase access to housing	 ✓ Coordinate a community housing committee ✓ Implement a community-based housing plan to reduce access to housing 	Development of workforce housing sub-committee Creation of housing priority needs for Churchill County Engagement of developers in creation of housing opportunities Identify funding partners to support needs
Strategy #3: Provide assessm health issues	ent, intervention, and ongoing su	pport to individuals with behavioral
Action Steps	Timeline	Performance Benchmarks
Online access for brief mental health assessment for law enforcement and service providers will be made available.	✓ By July 2020, the mental health assessment will be available via online for members	Crisis usage and access policies developed.
Create a universal data system for partners to access individual case plans, obtain case manager information, and create connections for ongoing services	✓ By July 2019: Standard policies will be developed for online access and data entry and user agreements will be developed and adopted by the Board of Health	Identify data needs
		Work with Regional Behavioral Health Board to identify data system Identify funding to support data system creation and ongoing
		Implement Regional contract for data system implementation
Strategy #4: Ensure behaviora reentry to the community. Action Steps	I health resources are available to	p justice involved individuals upon Performance Benchmarks
Develop a Memorandum of	✓ September 2018 obtain	MOU Development
Understanding for FASTT/ CHN	funding agreement ✓ November 2018 develop and sign MOU's ✓ December 2018 Implement program in the jail	MOU Approval

CM in jail M-F to complete assessment / resource hand off and follow up	 ✓ Contract with CCC to obtain CHW ✓ Develop and approve P&P ✓ Hire CHW 	A minimum 50 inmates will obtain FASTT reentry services per fiscal year A reduction of 10% will reenter the criminal justice system
Develop a list of all transportation based on risk	 ✓ Engage in the transportation study with NDOT ✓ Engage transportation providers to support needs of those that are most at risk 	Develop a comprehensive transportation guide
Ensure access to the appropriate medications at discharge	 ✓ Develop P&P with detention center to provide medically necessary medications at release ✓ Increase referrals to medical providers for inmates at release for medically necessary treatment 	P&P completed 25 referrals provided to inmates for medically necessary treatment and follow up at release

Strategic Area: Behavioral Health

Strategy #1: Educate youth and their parents about mental health and substance abuse, as well as services and resources.			
Action Steps	Timeline	Performance Benchmarks	
Develop media campaign on mental illness	 ✓ July 2018 contract with media coordinator ✓ Obtain funding to support media outreach 	A minimum of 3 ads / outreach posts will be conducted weekly Funding will be obtained to support coordinator and advertising	
Increase access to youth metal health providers	 ✓ July 2018 obtain funding to support counseling services ✓ Provide counseling in the school system 	Funding allocation MOU with CCSD to provide mental health counselling A minimum of 15 youth will obtain services annually	

Action Steps	Timeline	Performance Benchmarks
	✓ Develop Youth Committee by 2019	
	✓ Develop Youth Committee by 2019	
wife suspinger	✓ Develop Youth Committee by 2019	
Strategy #3: Educate traumatic experiences	parents and teachers to recognize and ide s.	entify youth who have undergone
Action Steps	Timeline	Performance Benchmarks
	✓ Develop Youth Committee by 2019	
	✓ Develop Youth Committee	

Focus Area: Community Health

Strategy #1: Provide increased diseases.	l education and treatment for STE	s and other communicable
Action Steps	Timeline	Performance Benchmarks
Provide Family planning and media outreach to increase awareness of STD's	✓ March 2018 launch media✓ July 2018 hire nurse to implement program	Implement media campaign Implement Family Planning project
ncrease treatment of STD's vith family planning education	✓ July 2018 launch Family Planning Project in Detention Centers and Schools	Decrease of 10% annually of communicable diseases positive tests
ncrease access to testing of communicable diseases to eens and high risk copulations	✓ July 2018 launch Family Planning Project in Detention Centers and Schools	Decrease of 10% annually of communicable diseases positive tests
Strategy #2: Provide family pla	nning education to youth and the	community.
Action Steps	Timeline	Performance Benchmarks
Provide Family planning and media outreach to increase awareness of STD's	July 2018 launch Family Planning Project in Detention Centers and Schools	Educate a minimum of 280 community members on family planning
		Educate a minimum of 150 middle school and high school age youth on family planning
Increase education on STD's with family planning education	July 2018 launch Family Planning Project in Detention Centers and Schools	Educate a minimum of 280 community members on family planning
		Educate a minimum of 150 middle school and high school age youth on family planning
	ber of family planning services ar unities for both youth and adults.	nd activities, including STD
Action Steps	Timeline	Performance Benchmarks
Provide Family planning and media outreach to increase awareness of STD's	July 2018 launch Family Planning Project in Detention Centers and Schools	Decrease of reported positive communicable disease tests by 10% annually

		Decrease of unplanned pregnancies by 15% annually	
Increase education on STD's with family planning education	July 2018 launch Family Planning Project in Detention Centers and Schools	Decrease of reported positive communicable disease tests by 10% annually	
		Decrease of unplanned pregnancies by 15% annually	
Strategy #4: Engage inmates a testing both during detention a	nt Churchill County Detention cer and upon reentry.	nters in family planning and STD	
Action Steps	Timeline	Performance Benchmarks	
Provide family planning activities for inmates at the Churchill County Detention Centers (youth and adult)	✓ July 2018 launch Family Planning Project in Adult Detention Center	Educate a minimum of 50 inmates on Family Planning and STD 's	
Provide testing and reatment of communicable liseases in detention centers	✓ July 2018 launch Family Planning Project in Adult Detention Center	Test a minimum of 25 inmates for STD's	
At reentry planning, provide eferral for ongoing family blanning activities after elease	✓ July 2018 launch Family Planning Project in Adult Detention Center	Provide a minimum of 50 inmates with referrals for follow up medical / Family Planning information at discharge	

Focus Area: Community Health

Goal: Increase community p	articipation in activities that s	upport health and wellness.
Strategy #1: Provide increased	education about healthy habits.	
Action Steps	Timeline	Performance Benchmarks
Educate the community on recreation, health services and resources to support healthy living	May 2018 launch media campaign on resources and activities that support a healthy life style	A minimum of 600 people annually will be engaged by media to participate in healthy living activities
Churchill County to Sponsor a minimum 3 events annually to support Healthy Living	✓ January each year the County will designate sponsorship to 3 events that support healthy living activities	A minimum of 75 people will benefit directly from sponsorship
Strategy #2: Collaborate with o	rganizations that support positiv	e health activities.
Action Steps	Timeline	Performance Benchmarks

Meet quarterly with organizations that support healthy living life styles	~	FY2019 the community partnership will engage organizations that support healthy life styles to participate	A minimum of 600 community members will be notified of partner activities
Churchill County will support organizations with a goal to increase healthy living	✓	2019 Churchill County will sponsor a minimum of 3 events offered by partners	A minimum of 75 people will benefit directly from sponsorship

Strategic Area: Self-Sufficiency

Action Steps	Timeline	Performance Benchmarks
Increase access to life counseling for all residents in need	✓ July 2018 a contracted life coach will be implemented to serve residents working towards self-sufficiency	A minimum of 25 residents will obtain life coaching
Provide access to support networks to avoid crisis	✓ July 2018 increase access to case management services in house and in the community	A minimum of 650 residents will obtain case management with a minimum of goal
Strategy #2: Develop commun for service Action Steps	ity based committees to evaluate	programming and remove barrier Performance Benchmarks
Support community resource partnership to evaluate program gaps, barriers and	✓ July 2018 maintain support to resource partnership	Quarterly meetings Survey
duplication	✓ July 2019 survey members on programming evaluation	G. T. Company of the